C	eremonial Role Even	ts and Ticket/F	Pass Distr	ibutions	RECEIVER	_ A P	<u> ublic Document</u>
1.	Agency Name		•	San	Jose Date Stamp	erk	California 802
	City of San Jose				UTUR	P	
	Division, Department, or Region (if applicable)				AN 18 PM 2:	39	For Official Use Only
	City Manager's Office						
	Designated Agency Contact (Name, Title)						
	David Sykes, City Manager			Amendment (Must Provide Explanation in Part 3.)			
	Area Code/Phone Number E-mail						
	(408) 535-8100	er@sanjoseca.gov		Date of Original Filing:			
2.	Function or Event Information						
	Does the agency have a ticket policy? Yes ⊠ No □ Face Value of Each Ticket/Pass \$ 100.00						
	Event Description: Taste of Championship  Provide Title/ Explanation  Date(s) 1 / 6 / 19						
	Ticket(s)/Pass(es) provided	Sports Authority  Name of Source	<u>/</u>				
	Was ticket distribution made of agency official?	e at the behest Yes	□ No⊠ <sup>I</sup>	f yes:	Official's Name (Last	, First)	
3.	Recipients  We See the Assistant Control of the See that						
	• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.  Number						
	A. Name of Agency, Depa	of Ticket(s)/	s)/ Describe the public purpose made pursuant to the agency's policy				
							·
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes		Identify one of the following:		
	See Attached List		Cerem		nonial Role  Other  Income  hing "Ceremonial Role" or "Other" describe below:  Income  the standard of the sta		
				Cerem		ther   Other" describ	Income Income
	C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Passes	Describe the	Describe the public purpose made pursuant to the agency's police		int to the agency's policy
	Verification I have read and understand FP	PC Regulations 18944	.1 and 18942	I have verified t	hat the distribution	set forth	above. is in accordance
	with the requirements.						
	DIXI	De	MKES	C.	IT'S MALIA	4.01	1/19/19
95.	Signature of Agency H and or Design	ee Pr	in Name		Title	<u> </u>	(month, day, year)
	Comment:						

Agency Report of:

## TASTE OF CHAMPIONSHIPS January 6, 2019 Attendees

<b>LAST NAME</b>	<b>FIRST NAME</b>	<b>QTY OF TICKETS</b>		
Jones	Chappie	2		
Tran	David	2		
Davis	Dev	2		
Khamis	Johnny	2		
Sun	Vicki	2		